

SAN LUIS MEDICAL & REHAB CENTER
2305 SAN LUIS PLACE

GREEN BAY 54304 Phone:(920) 494-5231
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/04): 130
Total Licensed Bed Capacity (12/31/04): 151
Number of Residents on 12/31/04: 112

Ownership:
Highest Level License:
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 112

Partnership
Skilled

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		61.6	
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		33.9	
Supp. Home Care-Household Services	No	Developmental Disabilities	4.5	Under 65	7.1	More Than 4 Years		4.5	
Day Services	No	Mental Illness (Org./Psy)	42.0	65 - 74	12.5			-----	
Respite Care	No	Mental Illness (Other)	6.3	75 - 84	40.2			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	30.4	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.8	95 & Over	9.8	Full-Time Equivalent			
Congregate Meals	No	Cancer	1.8		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	5.4		100.0	(12/31/04)			
Other Meals	No	Cardiovascular	11.6	65 & Over	92.9	-----			
Transportation	No	Cerebrovascular	6.3		-----	RNs		11.2	
Referral Service	No	Diabetes	2.7	Gender	%	LPNs		10.6	
Other Services	Yes	Respiratory	5.4	-----	-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	12.5	Male	26.8	Aides, & Orderlies			
Mentally Ill	No	-----	-----	Female	73.2				
Provide Day Programming for			100.0		-----				
Developmentally Disabled	Yes				100.0				

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	3	4.3	146	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	2.7	
Skilled Care	20	100.0	328	65	92.9	126	4	100.0	171	17	100.0	164	0	0.0	0	1	100.0	315	107	95.5	
Intermediate	---	---	---	1	1.4	105	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.9	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	1	1.4	184	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.9	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	20	100.0		70	100.0		4	100.0		17	100.0		0	0.0		1	100.0		112	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	18.3	Bathing	4.5	77.7	17.9	112
Private Home/With Home Health	0.0	Dressing	8.0	77.7	14.3	112
Other Nursing Homes	1.0	Transferring	23.2	66.1	10.7	112
Acute Care Hospitals	79.1	Toilet Use	17.0	67.0	16.1	112
Psych. Hosp.-MR/DD Facilities	0.0	Eating	73.2	22.3	4.5	112
Rehabilitation Hospitals	0.0	*****				
Other Locations	1.7	Continence		%	Special Treatments	%
Total Number of Admissions	301	Indwelling Or External Catheter	8.9	Receiving Respiratory Care		9.8
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	48.2	Receiving Tracheostomy Care		0.0
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bowel	27.7	Receiving Suctioning		0.0
Private Home/With Home Health	44.4			Receiving Ostomy Care		0.9
Other Nursing Homes	0.0	Mobility		Receiving Tube Feeding		0.0
Acute Care Hospitals	25.8	Physically Restrained	4.5	Receiving Mechanically Altered Diets		40.2
Psych. Hosp.-MR/DD Facilities	0.0			Other Resident Characteristics		
Rehabilitation Hospitals	0.0	Skin Care		Have Advance Directives		100.0
Other Locations	7.9	With Pressure Sores	3.6	Medications		
Deaths	21.9	With Rashes	2.7	Receiving Psychoactive Drugs		56.3
Total Number of Discharges (Including Deaths)	302					

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	74.2	88.5	0.84	90.2	0.82	90.5	0.82	88.8	0.84
Current Residents from In-County	95.5	80.0	1.19	82.9	1.15	82.4	1.16	77.4	1.23
Admissions from In-County, Still Residing	21.3	17.8	1.19	19.7	1.08	20.0	1.06	19.4	1.10
Admissions/Average Daily Census	268.8	184.7	1.45	169.5	1.59	156.2	1.72	146.5	1.84
Discharges/Average Daily Census	269.6	188.6	1.43	170.5	1.58	158.4	1.70	148.0	1.82
Discharges To Private Residence/Average Daily Census	119.6	86.2	1.39	77.4	1.55	72.4	1.65	66.9	1.79
Residents Receiving Skilled Care	98.2	95.3	1.03	95.4	1.03	94.7	1.04	89.9	1.09
Residents Aged 65 and Older	92.9	92.4	1.00	91.4	1.02	91.8	1.01	87.9	1.06
Title 19 (Medicaid) Funded Residents	62.5	62.9	0.99	62.5	1.00	62.7	1.00	66.1	0.95
Private Pay Funded Residents	15.2	20.3	0.75	21.7	0.70	23.3	0.65	20.6	0.74
Developmentally Disabled Residents	4.5	0.9	5.03	0.9	4.74	1.1	3.98	6.0	0.74
Mentally Ill Residents	48.2	31.7	1.52	36.8	1.31	37.3	1.29	33.6	1.43
General Medical Service Residents	12.5	21.2	0.59	19.6	0.64	20.4	0.61	21.1	0.59
Impaired ADL (Mean)	44.1	48.6	0.91	48.8	0.90	48.8	0.90	49.4	0.89
Psychological Problems	56.3	56.4	1.00	57.5	0.98	59.4	0.95	57.7	0.97
Nursing Care Required (Mean)	7.1	6.7	1.07	6.7	1.07	6.9	1.04	7.4	0.96